

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**DISCLOSURE REPORT
CANDIDATE COMMITTEE**

RECEIVED

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name: (Must be same as on Form CC-1)

Chris Halford

(b) Committee Name:

Friends for Halford

(c) Mailing Address:

479 Puunene Ave.
Kahului HI 96753

(d) Phone: (Bus)

(Res)

877-7221

Treasurer's

SECTION II-TYPE OF REPORT AND REPORTING PERIOD:

Check Appropriate Box(es)

9-22-02 through 10-21-02

☐ 1st Preliminary Primary

☐ Amended

☐ 2nd Preliminary Primary

☐ Short Form (11-212)

☐ Final Primary

☐ Short Form (11-213)

☒ Preliminary General

☐ Final General

☐ Supplemental

COPY

SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
1. Cash on Hand at Beginning of Election Period (Continuing Committee) OR at the time Form CC-1 was Filed (New Committee).....		1191.66
2. Cash on Hand at Beginning of this Reporting Period.....	741.01	
3. Total Receipts with Loans (From Line 17, Column A and B).....	1505.00	15,518.54
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	2246.01	16,710.20
5. Subtotal Disbursements (From Line 21, Column A and B).....	500.00	14,964.19
6. Cash on Hand at Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	1746.01	1,746.01
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at Beginning of this Reporting Period.....		
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....		
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....		
8. Total of Loans at Closing of this Reporting Period (Schedule E, Line 10).....	520.40	
9. Debts Owed BY the Candidate Committee at Closing of this Reporting Period (Add Lines 7(c) and 8).....		
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....		
11. Subtotal (Add Lines 9 and 10).....		
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	1746.01	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate

Date

Treasurer

Date

Form CC-5 (7/95)

SECTION III (Part 2) DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through H Before Completing This Section)

RECEIPTS		COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
13. Contributions From:			
(a) Individuals/Other Entities/Noncandidate Committees			
(i) Monetary Contributions of \$100 or Less.....	555.00	6347.05	
(ii) Non-Monetary Contributions of \$100 or Less.....	0	183.74	
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....	950.00	8987.75	
(iv) Total Contributions from Individuals/Other Entities/Noncandidate Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B).....	1505.00	15,518.54	
(b) Political Party Committees			
(i) Monetary Contributions of \$100 or Less.....	/	/	
(ii) Non-Monetary Contributions of \$100 or Less.....			
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule G, Line 2 for Column A).....			
(iv) Total Contributions from Political Party Committees (Add Lines (b)(i) through (b)(iii) for Columns A and B).....			
(c) Candidate and Candidate's Immediate Family			
(i) Monetary Contributions of \$100 or Less.....	/	/	
(ii) Non-Monetary Contributions of \$100 or Less.....			
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule D, Line 2 for Column A).....			
(iv) Total Contributions from Candidate and Candidate's Immediate Family (Add Lines (c)(i) through (c)(iii) for Columns A and B).....			
(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns A and B).....			
14. Public Funds and Other Receipts (Interest, Refunds, Etc.) (Schedule C, Line 2 for Column A).....			
15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B).....	1505.00	15,518.54	
16. Loans			
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 1 for Column A).....	/	/	
(b) Financial Institutions (Schedule E, Line 4 for Column A).....			
(c) Other Loans (Schedule E, Line 7 for Column A).....			
(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B).....			
17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B).....			
DISBURSEMENTS			
18. Expenditures (Schedule B, Line 3 for Column A).....	0	14,464.19	
19. Fundraising Expenditures (Schedule F, Line 3 for Column A).....	0	0	
20. Loan Repayments			
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 2 for Column A).....	500.00	0	
(b) Financial Institutions (Schedule E, Line 5 for Column A).....	0	0	
(c) Other Loans (Schedule E, Line 8 for Column A).....	0	0	
(d) Total Loan Repayments (Add Lines 20(a) through 20(c) for Columns A and B).....	0	0	
21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B).....	500.00	14,964.19	
22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for Column A) (Net Change This Period).....	0	0	
23. Total Disbursements (Add Lines 21 and 22 for Columns A and B).....	500.00	14,964.19	

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

SCHEDULE A

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

Friends for Halford

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
9-30-02	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Helen D. Christman 3448 Hookipa St. Kihei 96753</i>	<i>?</i>	<i>200.</i>	<i>200.</i>
10-4-02	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Terry and Gill Mc Barnett 59 Akea Pl. Kula 96790</i>		<i>500.</i>	<i>500.</i>
10-4-02	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>UH Professional Assembly 1017 Palm Dr. Honolulu HI 96814</i>		<i>250.</i>	<i>1987.75</i>
10-11-02	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>L. S. Riford, Jr. 3145 Nahenahe Pl. Kihei 96753</i>		<i>100.</i>	<i>450.</i>
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE)..... *1050.00*

2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-6, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A)..... *1050.00*

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

Chris Halford Friends for Halford

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
	<u>None</u>		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE).....
2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....
3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 19, COLUMN A).....

None

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION
SCHEDULE E
LOANS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

Chris Halford

Friends for Halford

CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY MEMBER	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN REPAYMENT THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD
<i>11/2/98</i>	<i>Candidate</i>	<i>1020.40</i>	<i>0</i>	<i>500.00</i>	<i>520.40</i>

1. TOTAL OF LOANS FROM CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18(a), COLUMN A).....	<i>0</i>	
2. TOTAL OF LOAN REPAYMENTS FOR CANDIDATE AND CANDIDATE'S IMMEDIATELY FAMILY THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(a), COLUMN A).....	<i>500.00</i>	
3. TOTAL OF LOANS FROM CANDIDATE AND CANDIDATE'S IMMEDIATE FAMILY AT CLOSING OF THIS REPORTING PERIOD.....		<i>520.40</i>

FINANCIAL INSTITUTIONS

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF FINANCIAL INSTITUTIONS	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN REPAYMENT THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD

4. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18(b), COLUMN A).....		
5. TOTAL OF LOAN REPAYMENTS FOR FINANCIAL INSTITUTIONS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(b), COLUMN A).....		
6. TOTAL OF LOANS FROM FINANCIAL INSTITUTIONS AT CLOSING OF THIS REPORTING PERIOD.....		

OTHER LOANS

DATE OF LOAN	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF OTHER LOANS	AMOUNT OF LOAN AT BEGINNING OF THIS REPORTING OR ELECTION PERIOD	NEW LOAN OR INCREASE IN LOAN AMOUNT THIS PERIOD	LOAN REPAYMENT THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS REPORTING PERIOD

7. TOTAL OF LOANS FROM SOURCE OF OTHER LOANS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18(c), COLUMN A).....		
8. TOTAL OF LOAN REPAYMENTS FOR SOURCE OF OTHER LOANS THIS PERIOD (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 20(c), COLUMN A).....		
9. TOTAL OF LOANS FROM SOURCE OF OTHER LOANS AT CLOSING OF THIS REPORTING PERIOD.....		
10. TOTAL OF LOANS AT CLOSING OF THIS REPORTING PERIOD (ADD LINES 3, 6 AND 9 AND ENTER TOTAL ON FORM CC-5, SECTION III (PART 1), LINE 8).....		